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PTO/SB/01 (8-96)
Approved for use through 9/30/98. OMB 0651-0032
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE
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DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION

☐ Declaration Submitted with Initial Filing OR ☐ Declaration Submitted after Initial Filing

Attorney Docket Number **SERVIER 366 PCT**

First Named Inventor

COMPLETE IF KNOWN

Application Number

Filing Date

Group Art Unit

Examiner Name

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

NEW QUATERNARY AMMONIUM COMPOUNDS.

(Title of the Invention)

the specification of which

☐ is attached hereto
OR

☒ was filed on (MM/DD/YYYY)

06/22/2000

as United States Application Number or PCT International

Application Number

PCT/FROO/01731

and was amended on (MM/DD/YYYY)

(if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 37 Code of Federal Regulations, §1.56.

I hereby claim foreign priority benefits under Title 35, United States Code §119 (a)-(d) or §365(b) of any foreign application(s) for patent or inventor's certificate, or §365 (a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
9908020	FRANCE	06/23/1999	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority sheet attached hereto:

I hereby claim the benefit under Title 35, United States Code § 119(e) of any United States provisional application(s) listed below.

Application Number(s)

Filing Date (MM/DD/YYYY)

☐ Additional provisional application numbers are listed on a supplemental priority sheet attached hereto.

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DECLARATION

I hereby claim the benefit under Title 35, United States Code §120 of any United States application(s), or §365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of Title 35, United States Code §112, I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application Number	PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority sheet attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

Name	Registration Number	Name	Registration Number

☐ Additional registered practitioner(s) named on a supplemental sheet attached hereto.


Direct all correspondence to:

Name	THE FIRM OF HUESCHEN AND SAGE		
Address	PLLC ATTORNEYS AND COUNSELORS		
Address	500 COLUMBIA PLAZA		
City	350 EAST MICHIGAN AVENUE		
Country	KALAMAZOO, MICHIGAN 49007-3856		
	ZIP		
	Fax		

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor:

☐ A petition has been filed for this unsigned inventor

Given Name	Jean-Claude	Middle Initial		Family Name	MADELMONT	Suffix e.g. Jr.	
Inventor's Signature	 JC MADELMONT					Date	November 23, 2001

Residence: City	Romagnat	State	FR	Country	FRANCE	Citizenship	FR
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Post Office Address	32, boulevard du Chauffour						
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Post Office Address							
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City	ROMAGNAT	State	FR	Zip	63540	Country	FRANCE
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☒ Additional inventors are being named on supplemental sheet(s) attached hereto

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DECLARATION

ADDITIONAL INVENTOR(S) Supplemental Sheet

Name of Additional Joint Inventor, if any:										<input type="checkbox"/> A petition has been filed for this unsigned inventor											
Given Name		Isabelle				Middle Initial				Family Name		GIRAUD				Suffix e.g. Jr.					
Inventor's Signature		Isabelle GIRAUD <i>[Signature]</i>								Date		November 23, 2001									
Residence: City		DOURDAN <i>JRK</i>				State		FR		Country		FRANCE				Citizenship		FR			
Post Office Address		10, ruelle du Saint-Esprit																			
Post Office Address																					
City		DOURDAN				State		FR		Zip		91410				Country		FRANCE			
Name of Additional Joint Inventor, if any:										<input type="checkbox"/> A petition has been filed for this unsigned inventor											
Given Name		Colette				Middle Initial				Family Name		NICOLAS				Suffix e.g. Jr.					
Inventor's Signature		Colette NICOLAS <i>[Signature]</i>								Date		November 23, 2001									
Residence: City		LE CHEIX-SUR-MORGE <i>JRK</i>				State		FR		Country		FRANCE				Citizenship		FR			
Post Office Address		1, route de Paris																			
Post Office Address																					
City		LE CHEIX-SUR-MORGE				State		FR		Zip		63200				Country		FRANCE			
Name of Additional Joint Inventor, if any:										<input type="checkbox"/> A petition has been filed for this unsigned inventor											
Given Name		Jean-Claude				Middle Initial				Family Name		MAURIZIS				Suffix e.g. Jr.					
Inventor's Signature		Jean-Claude MAURIZIS <i>[Signature]</i>								Date		November 23, 2001									
Residence: City		PERIGNAT-LES-SARLIEVE <i>JRK</i>				State		FR		Country		FRANCE				Citizenship		FR			
Post Office Address		3, impasse Lamartine																			
Post Office Address																					
City		PERIGNAT-LES-SARLIEVE				State		FR		Zip		63170				Country		FRANCE			
Name of Additional Joint Inventor, if any:										<input type="checkbox"/> A petition has been filed for this unsigned inventor											
Given Name		Maryse				Middle Initial				Family Name		RAPP				Suffix e.g. Jr.					
Inventor's Signature		Maryse Rapp <i>[Signature]</i>								Date		November 23, 2001									
Residence: City		VEYRE-MONTON <i>JRK</i>				State		FR		Country		FRANCE				Citizenship		FR			
Post Office Address		3, allée des Eguiers																			
Post Office Address																					
City		VEYRE-MONTON				State		FR		Zip		63960				Country		FRANCE			
<input checked="" type="checkbox"/> Additional inventors are being named on supplemental sheet(s) attached hereto																					

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DECLARATION										ADDITIONAL INVENTOR(S) Supplemental Sheet	
Name of Additional Joint Inventor, if any:										<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name	Monique			Middle Initial		Family Name	OLLIER			Suffix e.g. Jr.	
Inventor's Signature	Monique OLLIER <i>CLL</i>						Date	November 23, 2001			
Residence: City	ROMAGNAT <i>JR</i>			State	FR	Country	FRANCE			Citizenship	FR
Post Office Address		6, rue des Caves									
Post Office Address											
City	ROMAGNAT			State	FR	Zip	63540		Country	FRANCE	
Name of Additional Joint Inventor, if any:										<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name	Pierre			Middle Initial		Family Name	RENARD			Suffix e.g. Jr.	
Inventor's Signature	Pierre RENARD <i>PR</i>						Date	November 23, 2001			
Residence: City	LE CHESNAY <i>JR</i>			State	FR	Country	FRANCE			Citizenship	FR
Post Office Address		3, avenue du Parc									
Post Office Address											
City	LE CHESNAY			State	FR	Zip	78150		Country	FRANCE	
Name of Additional Joint Inventor, if any:										<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name	Daniel-Henri			Middle Initial		Family Name	CAIGNARD			Suffix e.g. Jr.	
Inventor's Signature	Daniel-Henri CAIGNARD <i>CH</i>						Date	November 23, 2001			
Residence: City	LE PEOQ <i>JR</i>			State	FR	Country	FRANCE			Citizenship	FR
Post Office Address		22, avenue de la République									
Post Office Address											
City	LE PEOQ			State	FR	Zip	78230		Country	FRANCE	
Name of Additional Joint Inventor, if any:										<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name				Middle Initial		Family Name				Suffix e.g. Jr.	
Inventor's Signature							Date				
Residence: City				State		Country				Citizenship	
Post Office Address											
Post Office Address											
City				State		Zip			Country		
<input type="checkbox"/> Additional inventors are being named on supplemental sheet(s) attached hereto											

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